

AO 240 (Rev. 10/03)
DELAWARE (Rev. 4/05)UNITED STATES DISTRICT COURT
DISTRICT OF DELAWARELeVaughn G. Walker

Plaintiff

v.

P. Phelps, R. Hosterman, L. Kemp

Defendant(s)

APPLICATION TO PROCEED
WITHOUT PREPAYMENT OF
FEES AND AFFIDAVIT

CASE NUMBER: 08 - 275

I, LeVaughn G. Walker

declare that I am the (check appropriate box)

☒

Petitioner/Plaintiff/Movant

☐

Other

in the above-entitled proceeding; that in support of my request to proceed without prepayment of fees or costs under 28 USC §1915, I declare that I am unable to pay the costs of these proceedings and that I am entitled to the relief sought in the complaint/petition/motion.

In support of this application, I answer the following questions under penalty of perjury

1. Are you currently incarcerated? ☒ Yes ☐ No (If "No" go to Question 2)

If "YES" state the place of your incarceration D.C.C 1181 Paddock Rd, Smyrna, DE 19777Inmate Identification Number (Required): 306213Are you employed at the institution? No Do you receive any payment from the institution? NoAttach a ledger sheet from the institution of your incarceration showing at least the past six months' transactions

2. Are you currently employed? ☐ Yes ☒ No

a. If the answer is "YES" state the amount of your take-home salary or wages and pay period a and give the name and address of your employer.

b. If the answer is "NO" state the date of your last employment, the amount of your take-home salary or wages and pay period and the name and address of your last employer. NA

3. In the past 12 twelve months have you received any money from any of the following sources?

- | | | |
|---|---|-----------------------------|
| a. Business, profession or other self-employment | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| b. Rent payments, interest or dividends | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| c. Pensions, annuities or life insurance payments | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| d. Disability or workers compensation payments | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| e. Gifts or inheritances | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| f. Any other sources | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |

If the answer to any of the above is "YES" describe each source of money and state the amount received AND what you expect you will continue to receive.

I received (2) 100 dollar money orders From grandmother over a six period. Not always reliable. I expect another 100 dollar money order 3 months From my Mother's court at ...

AO 240 Reverse (Rev. 10/03)
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4. Do you have any cash or checking or savings accounts? •• Yes •☒ No

If "Yes" state the total amount \$ _____

5. Do you own any real estate, stocks, bonds, securities, other financial instruments, automobiles or other valuable property? •• Yes •☒ No

If "Yes" describe the property and state its value.

6. List the persons who are dependent on you for support, state your relationship to each person and indicate how much you contribute to their support, *OR* state *NONE* if applicable.

E P - SON
sent 10 dollars when able at least 4 times a year.

I declare under penalty of perjury that the above information is true and correct.

4/29/08
DATE


SIGNATURE OF APPLICANT

NOTE TO PRISONER: A Prisoner seeking to proceed without prepayment of fees shall submit an affidavit stating all assets. In addition, a prisoner must attach a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months in your institutional accounts. If you have multiple accounts, perhaps because you have been in multiple institutions, attach one certified statement of each account.

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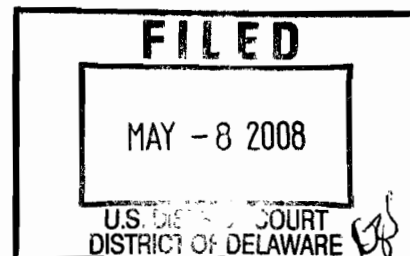
DELAWARE CORRECTIONAL CENTER
SUPPORT SERVICES OFFICE
MEMORANDUM

TO: LeVaughn Walker SBI#: 306213

FROM: Stacy Shane, Support Services Secretary

RE: 6 Months Account Statement

DATE: April 29, 2008



Attached are copies of your inmate account statement for the months of October 1, 2007 to March 31, 2008.

The following indicates the average daily balances.

<u>MONTH</u>	<u>AVERAGE DAILY BALANCE</u>
<u>Oct</u>	<u>55.20</u>
<u>Nov</u>	<u>63.28</u>
<u>Dec</u>	<u>142.56</u>
<u>Jan</u>	<u>140.68</u>
<u>Feb</u>	<u>121.11</u>
<u>March</u>	<u>93.92</u>

Average daily balances/6 months: 102.84

Attachments

CC: File

Stacy Shane
4/29/08

Jeanelle L. Davis
4/29/08

Individual Statement From January 2008 to March 2008

Date Printed: 4/29/2008

Page 1 of 1

SBI	Last Name	First Name	MI	Suffix	Beginning Month Balance:	\$149.02
00306213	Walker	Levaughn			Ending Month Balance:	\$62.89
Current Location:	17	Comments:				
Trans Type	Date	Deposit or Withdrawal Amount	Medical Hold	Non-Medical Hold	Balance	Trans #
Canteen	1/2/2008	(\$4.92)	\$0.00	\$0.00	\$144.10	535171
Canteen	1/15/2008	(\$4.78)	\$0.00	\$0.00	\$139.32	542327
Canteen	1/29/2008	(\$9.94)	\$0.00	\$0.00	\$129.38	548049
Supplies-MailPosta	2/12/2008	\$0.00	\$0.00	(\$0.75)	\$129.38	554801
Canteen	2/12/2008	(\$10.00)	\$0.00	\$0.00	\$119.38	555459
Supplies-MailPosta	2/15/2008	(\$0.75)	\$0.00	\$0.00	\$118.63	557572
Canteen	2/26/2008	(\$9.95)	\$0.00	\$0.00	\$108.68	561430
Canteen	3/11/2008	(\$9.79)	\$0.00	\$0.00	\$98.89	568441
Canteen	3/25/2008	(\$36.00)	\$0.00	\$0.00	\$62.89	574686
Ending Month Balance:					\$62.89	

Total Amount Currently on Medical Hold: \$0.00

Total Amount Currently on Legal Hold: \$0.00

Total Amount Currently on Restitution Hold: \$0.00

Total Amount Currently on Other Hold: \$0.00

Individual Statement

From October 2007 to December 2007

Date Printed: 4/29/2008

Page 1 of 1

SBI	Last Name	First Name	MI	Suffix	Beginning Month Balance:	\$31.48
00306213	Walker	Levaughn			Ending Month Balance:	\$149.02
Current Location:	17	Comments:				

Trans Type	Date	Deposit or Withdrawal Amount	Medical Hold	Non-Medical Hold	Balance	Trans #	MO# / Ck#	Pay To	Source Name
Mail	10/15/2007	\$100.00	\$0.00	\$0.00	\$131.48	499967	11798493838		W PALMER
Canteen	10/16/2007	(\$48.90)	\$0.00	\$0.00	\$82.58	500479			
Supplies-MailPosta	10/19/2007	\$0.00	\$0.00	(\$14.03)	\$82.58	502909		10/14/07	
Supplies-MailPosta	10/19/2007	(\$14.03)	\$0.00	\$0.00	\$68.55	503224		10/14/07	
Canteen	11/9/2007	(\$4.80)	\$0.00	\$0.00	\$63.75	512581			
Canteen	11/20/2007	(\$4.76)	\$0.00	\$0.00	\$58.99	515782			
Canteen	12/4/2007	(\$4.99)	\$0.00	\$0.00	\$54.00	523007			
Mail	12/4/2007	\$100.00	\$0.00	\$0.00	\$154.00	523338	11799454533		W PALMER
Canteen	12/18/2007	(\$4.98)	\$0.00	\$0.00	\$149.02	528667			
					Ending Month Balance:	\$149.02			

Total Amount Currently on Medical Hold: \$0.00

Total Amount Currently on Legal Hold: \$0.00

Total Amount Currently on Restitution Hold: \$0.00

Total Amount Currently on Other Hold: \$0.00